



## Challenges of (medical) writing for the multilingual audience

By Susanne Geercken

Sometimes when I tell people that I am a translator working mostly from English into German, I get the response, “But isn’t translation a dying profession? Surely, everybody understands English nowadays.” And, at least in Germany, developments seem to support this view—recently it has become fashionable for companies in Germany to do their advertising in English. Some time ago, for example, a chain of drugstores came up with the slogan “Come in and find out.” However, when German customers were asked what they thought the slogan meant, it turned out that 1) most people were not sure what it said and 2) when pressed to translate the message, many came up with something to the effect of “Come in and find your way out again.”

This example illustrates a common lack of awareness on the part of English-speaking authors that writing for an audience whose first language is not English requires special attention. As we shall see below, this can lead to a number of communication problems.

While advertising generally has little in common with medical writing, some parallels can be drawn here. In today’s globalized pharmaceutical industry, medical and pharmaceutical texts are typically produced in English and subsequently distributed to audiences whose first language is not English. In some instances, these documents will be translated into local language. However, in the majority of cases, English is used as the ‘common’ language. In this case, it is assumed that the multilingual target audience will understand English ‘in some way similar’ to native English speakers.

Of course, there are obvious differences between an English and a non-native English-speaking target audience with the most important difference being that proficiency in English will vary a great deal among the latter audience. To account for this, authors are typically encouraged to use appropriately ‘simple’ language, avoiding difficult and rare words. Alas, the advertising example above shows that things can go wrong even when this strategy is observed. Why has the strategy not been effective?

It is my experience that, particularly in a medical context, complicated words like ‘jeopardize,’ ‘juxtapose’ or ‘increment’ in fact do not constitute a problem for readers with restricted proficiency in English as long as these terms can be looked up in a dictionary. Interestingly and on the contrary, it is the ‘simple’ expressions like phrasal verbs (‘take care of,’ ‘care for,’ ‘look up,’ ‘look after’ or—as in our

example—‘find out’) that tend to be perceived as difficult and confusing by non-native English speakers. This may be due to the fact that many non-native English speakers in our field typically have received a fair amount of formal training in English and are familiar with the professional jargon in their field. However they may not have been exposed to ‘everyday English’ long enough to be familiar with more idiomatic expressions.

To the non-native speaker’s dismay, English is a language that can be very ambiguous and difficult to interpret. My pet example is the use of the prepositional phrase ‘within...of,’ which, to my regret, seems to have recently become quite fashionable among English-speaking authors.

The following (real) examples from clinical trial documents will explain my dislike of the preposition:

1. If your child experiences a severe side effect *within* 28 days *of* the last dose of study medication, make sure to tell the study doctor.
2. Informed consent and medical history may be performed *within* 14 days *of* treatment.

In the first example, it is fairly clear from the context that the prepositional phrase ‘within...of’ means ‘after’ (events should be reported until 28 days *after* the last dose of study medication) while in the second example the same prepositional phrase can only mean ‘before.’ Incidentally, this second sentence was mistranslated to read ‘after the start of treatment,’ which – in a clinical trial context – would have constituted a breach of ICH GCP guidelines.

To my mind a prepositional phrase which, depending on the context, can have opposite meanings should definitely be banned from any texts written to be understood immediately and unambiguously—as is the case with medical texts. This is particularly true when these texts are geared at a multilingual audience.

Even when language is not a problem, there are culture-related issues that can impair comprehensibility in the communication with non-native English speakers.

Some years ago I experienced an awkward situation due to a fairly banal cultural misunderstanding: When I was offered a job in the US, I needed a visa, which was applied for by my future employer in the US on the basis of my German passport. The passport gave my date of birth as 07.12.1961. Especially those of you who have read Alistair Reeves’ *TWS* article on ‘Dating made easy...’ [1] will not

be surprised that the visa issued stated my date of birth as 12 July 1961 (when, of course, my real birth date is 07 December 1961). As you can imagine, the ensuing corrective action was quite time-consuming and enervating and almost resulted in my having to cancel the flight.

As we all know, this potential confusion about date formats also comes up in medical texts. In a clinical study context, authors writing e.g. clinical study case report forms for multi-country studies typically attempt to resolve the problem by trying to force a particular date format. What I often see is:



This looks quite reasonable at first sight. Yet for the target audience, which will include physicians or nurses whose first language is not English, it may not be clear at all how exactly to enter the date because they are likely to be unfamiliar with the underlying *convention* for the date format, namely to use *capitalized letters* for the month. Thus, unless further instructions are provided to bridge the 'cultural gap' (e.g. by giving an example for a date to be entered), this format has a great potential for eliciting incorrect data when used in a multilingual context.

This simple example illustrates that authors addressing a multilingual (and multicultural) audience must take a closer look at their own unconscious and implicit assumptions about culture-specific conventions. Understanding texts is a two-step process: we read the text and relate what we read to what we know about 'the world.' Linguists tell us that the knowledge about the world we store in our heads is organized into what they call 'frames' and 'scenes'-prototypical images about concepts such as 'hospital', 'doctor's visit' or 'pain killers.'

These prototypical images evoked in our heads (incidentally together with their attendant emotional reactions) are intrinsically linked with our cultural experience. Hence, as a German when I read 'pain killer' I will most likely think of a green and white 20-tablet package of Aspirin while someone from the US might rather think of a bottle of Tylenol.

Admittedly, these culture-related 'conceptual discrepancies' between author and audience, (and in fact also between the various groups within the multilingual audience), are most challenging when the cultures involved are maximally different. Yet, even with relatively similar cultures such as the US and Germany, these discrepancies can interfere with communication. Some 10 years ago I worked on a clinical study project with a protocol issued in the US that called for 'exercise testing.' During the discussions on how to execute the protocol, it turned out that the authors of the protocol were referring to *treadmill* exercise (at the time the most widely used method in the US) while the European audience understood exercise testing to mean *bicycle* exercise testing since this was the most common

method there. Obviously, the prototypical image of 'exercise test' differed between the authors and their audience, creating a communication problem which was detected and resolved only when the two parties began to talk to each other.

This article, like the EPDP short workshop entitled 'Medical Writing for the Multilingual Audience,' tries to raise awareness about the linguistic and cultural misunderstandings that can arise when English is used to communicate with audiences whose first language is not English. As we have seen, these misunderstandings tend to be difficult to control. Often when such misunderstandings are uncovered, they come as a surprise to the well-intended author — native English speakers seem to be quite unaware of the 'within... of' problem and have reacted with surprise and disbelief. While there are no ready-made answers, I am convinced that authors who take a step back and try to read their own texts with the eyes of their prospective multilingual audience will undoubtedly find ways to ensure successful communication: adding just that extra bit of information does the job of closing the cultural or linguistic gap.

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#### Reference

1. Reeves, A. Dating made easy. *The Write Stuff* 2006;15(1):25-6

## Medical writing and more languages in store on Wikipedia

Wikipedia is the enormously successful free online encyclopaedia that anyone can edit and everyone knows ([www.wikipedia.org](http://www.wikipedia.org)). You can even find 'medical writing' on Wikipedia, and edit it if you like. In a quick chat with the magazine *BBC Focus* (No.163 May 2006) Jimmy Wales, who is one of its co-founders, was asked what current projects he was working on. 'Language' was the answer. It seems that although he feels they are very strong in all the European languages and not so bad in Japanese and Chinese, this is not enough. They want to accelerate the growth of Wikipedia in other languages and currently have projects in over 80 languages.

Another interesting aspect touched on in the interview was their finding that the opportunity to edit had led to far less abuse from the general public than they had predicted. Politicians are the worst abusers but the open editing system is quick to self-correct. Added to which, there's a small army of monitors including volunteer specialists who check certain fields and over 1000 others who keep an eye on recent page changes.